**ANNUAL** 

# REPORTS

OF THE

MEDICAL OFFICER OF HEALTH (R. G. BRADFORD, M.B),

AND

INSPECTOR OF NUISANCES (Mr. D. A. BRADBURY).

1919.



# BROWNHILLS

# Orban District Council.

EIGHTH

# ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

R. G. BRADFORD, M. B.

1919.

BROWNHILLS:

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# DEATH RATE.

The number of deaths for this year was 372. This includes persons who belong to the district but who died in another district and excludes persons who died here but who belong to another district.

The death rate is 22.4 per thousand. This is about double the death rate of last year.

The rate for England and Wales during the same period was 17.6 per thousand.

Deaths from Influenza account largely for the increased rate, but some other diseases, chiefly respiratory, are greatly in excess of last year.

A comparison of 1917 and 1918 where the difference in number of deaths is marked, gives:—

	1917.	1918.
Influenza	2	78
Pneumonia	14	31
Bronchitis	16	28
Pulmonary Tuberculosis	9	18
Whooping Cough	2	12
Heart disease	19	<b>3</b> 3
Cancer	8	18

BIRTHS.

The number of births was 475, a rate of 25.5 per thousand.

239 were Males.

236 were Females.

17 of the births were illegitimate

The rate for England and Wales was 17.7

The rate for the district for 1917 was 25.6 per thousand.

# INFANTILE MORTALITY.

Fifty.nine children under 1 year died during the year, a death rate of 124 per thousand births. Influenza was responsible for only one of these deaths

Congenital Debility and Marasmus which are in great part preventable causes were responsible for 29 deaths.

This is regretable and disappointing. I attribute this to several factors.

Some of the mothers were working in Munition Factories The general health of the community was low.

The food taken was not sufficiently nourishing, for although substitutes could have been obtained for certain necessary and scarce foods, those were not used to any extent.

There was a scarcity of good milk in the district.

The death rate for England and Wales was 97 per thousand births.

For 1917 in this district it was 106 per thousand births

The causes of the 59 deaths are given below and a comparison made with 1917.

	1918	1917
Congenital Debility & Marasmus	29	26
Measles	3	3
Whooping Cough	6	1
Convulsions	1	
Bronchitis	5	4
Pneumonia	5	8
Meningitis	1	2
Diarrhoea	3	3
Influenza	1	
Other causes	5	5

# INFANT WELFARE WORK.

Report of Miss Bown, Health Visitor for the District.

There were notified to me by the Medical Officer of Health 467 births.

Each baby has been visited, and in the case of still births a visit has been paid to the mother.

In a few cases where the mother has had several pic-mature or still born children I have advised medical attention. Two of these are now receiving necessary hospital treatment.

1720 re-visits have been paid. Advice hasbeen given to mothers with regard to the feeding, clothing, sleeping and minor ailments. When necessary I have advised medical assistance. When mothers are not able to breast feed the infants there is a great temptation to give easily prepared, cheap, unsuitable foods.

A great deal of supervision and teaching will yet be necessary before the people as a body realize that artificial infant feeding is a highly scientific matter.

Mothers with a family of young children, or with a small weeky income can obtain some of the artificial foods at a reduced rate. In necessitous cases it will be supplied free.

The tube feeding bottle is still in evidence in some homes but usually disappears after the danger is explained to the mothers.

The sleeping of the infants is not sufficiently considered. They are in many cases put to bed too late. It is a customary occurrence to find a baby out at eight or nine o'clock even during the winter months

The evil results of irregularity in feeding, and irregularity in sleeping intervals are not realized.

Babies, in a large proportion of the families, sleep with the parents. Mothers say in excuse that the babies do not sleep so well and cry more frequently in a cot. This is usually due to the fact that they are not warm and not well tucked in.

I frequently find that the elder children are not sufficient. ly clothed when out of doors during the cold weather and they have too much clothing indoors. I certainly find agreat improvement in the readiness with which mothers listen to and take advice.

There was an out-break of measles during the year.

At the request of the Medical Officer of Health I visited most of these cases, gave advice as to the nursing of the patients and explained the seriousness of the complications, how to guard

against them and how to avoid the spread of infection. In all I made 119 visits.

The following is a table of the work done during the Year

Births notified 467 including 5 cases of twins.

First visits to new babies 467

Re-visits 1720

Visited, but not on books 7

# METHOD OF FEEDING,

Breast fed	•••	365
Partly breast fed		35
Bottle fed		42
Stillborn babies	•••	7
Died before 10 days		18
,, under l year		59
., over 1 ,,	• • •	
Cases of Measles visited		119
,, reported to Sanitary Inspector		39

# NOTIFIABLE DISEASES.

The following is a list of Infectious cases notified during the year.

Diphtheria	•••	22
Scarlet fever		26
Measles	•••	298
Pulmonary Tuber	culosis	24
Other Tubercular	diseases	8
Enteric fever	•••	2
Puerperal fever	••	1
Ophthalmia Neona	torum	4
Erysipelas	•••	9

The greater proportion of Diphtheria cases occurred in the Norton Canes Schools. About 50 swabs were taken from contacts. One carrier was found amongst those. The case was sent home, isolated and treated.

One of the Enteric cases occurred in a Van. Unfortunately the Van and patient left the district without permission and could not be traced

The four cases of Ophthalmia Neonatorum were attended and treated by the Health Visitor.

Only one of the cases was severe and had to be sent to the Hospital. The others cleared rapidly on treatment.

Schools were closed on account of the following Infectious diseases.

Diphtheria Measles Mumps Whooping Cough Influenza

# INFLUENZA

Influenza first appeared in this district about the end of June.

Very few of the people escaped entirely, Fortunately most of the cases were mild and serious complications were rare. There were 4 deaths in July. Three of these were due to Influenzal Pneumonia, one to Cardiac failure.

This outbreak subsided about the end of July, having lasted about 5 weeks. From then until the 3rd week in October only isolated cases occurred, but from this week until the 14th of December a most severe recurrence of the disease visited the

district. It was characterised by the large number of cases with respiratory complications, chiefly Broncho Pneumonia. Many of the Pneumonias developed early in the disease frequently the 2nd or 3rd day and terminated fatally in a very short time.

This type was attended by a progressive cyanosis without any definite signs of consolidation. Convalencence in the few cases that did recover was prolonged and tedious. Housing conditions had an important influence on the course of the disease. Where the conditions were bad, complications occurred with great frequency.

The largest number of deaths was in the Central Ward. Here much of the property is old and in bad repair. Windows won'ts open. Fire Grates in some of the bedrooms were perhaps originally put in for ornament, certainly not for use.

I hold the opinion that some at least of the deaths would have been prevented if the housing conditions had been better

Had there been a small well-equipped temporary Hospital where cases could have been taken when the bedroom ac commodation was inadequate or bad some of the fatal cases might have recovered.

It was on this account that permission was asked that a suitable place might be taken in each of the three Wards which could speadily be equipped as a small Hospital.

Unfortunately there was a great difficulty in gettiing nurses at the time. Even partially trained voluntary helpers were not forthcoming and as the outbreak was subsiding the need of the hospital passed away.

In this connection four members of your Council were appointed who with myself had full powers to act quickly

should the same conditions arise at a future time.

Permission was also given that a nurse should be employed in each ward, the nurse to give her sole attention to the nursing of Influenza cases. Here again the difficulty of obtaining nurses for district work came in the way.

In the Walsall Wood Ward and in the Brownhills Ward there were nurse under two nursing associations. They gave considerable assistance in all the necessary cases. In Norton Canes there was no district nurse. There the only available nurse was placed. I understand that she rendered vauable assistance in that district.

A Scarlatinal rash appeared in a few of the cases in child ren, the other members of the family at the same time suffering from Influenza but showing no rash. These cases were carefully examined for signs of desquamation afterwards. This was very slight, but present in all cases. The incubation period appeared to be from one to two days.

Infectivity was certainly greatest during the first three days, as the disease spread rapidly through the household. Generally by the 4th day most of the members of the family were affected in some degree. Infectivity, was in the majority of cases very slight at the end of the first week

There was no evidence that one attack protected against a second attack. Many of the July cases were again affected in November. Many of the 2nd attacks were severe and some of them fatal. Schools were closed during both outbreaks, and during the November epidemic, children were not admitted into the Cinema Theatres in the district.

The Health Visitor had many opportunities to give

valuble assistance, giving advice as to diet and instructing those attending on the cases in nursing matters.

Pamphlets were issued to the school children to convey to their homes, giving advice on many matters and drawing special attention to the value of the throat and nose disinfection

The number of deaths was 78 35 were Male 43 , Female

Four deaths occurred during pregnancy
Influenza is certainly a very serious disease when it attacks
the pregnant woman.

Most of the workers in the district are miners and on this account no real purpose would be served by giving the occupations.

Nevertheless a table is given below giving deaths amongst Miners, Housewives, Children, Munition workers, Surface men and Labourers.

Miners	14
Housewives	<b>3</b> 0
Children	26
Munition workers	3
Surface men	3
Labourers	2
	78

I remain Gentlemen,

Your obedient Servant,

ROBERT G. BRADFORD.

#### TO THE

# CHAIRMAN AND MEMBERS

OF THE

# URBAN DISTRICT COUNCIL.

GENTLEMEN,

This, my ninth Annual Report, is, as far as possible, a complete survey of Sanitary and other matters which directly concern the work of the Sanitary Inspector and myself as Medical Officer of Health.

During the five years of war, sanitary matters were perforce allowed to drift somewhat. Conditions which, before the war, would not have been tolerated, were, through the difficulties of the times, allowed to remain.

Those difficulties, to a great extent, are still present, and it can only be by very earnest and vigorous work that any progress will be made. The health of the people must be the first consideration. This can only result from healthy surroundings, good sanitation, and more especially, good and comfortable housing conditions.

The district situated in the south-west of the county is bounded on the north by the Cannock Urban, on the west by the Cannock Rural, on the east by the Lichfield Rural, and on the south by the Walsall Rural districts.

It may be divided into four compactly populated centres; Shelfield lying close to the outskirts of Walsall, Walsall Wood, Brownhills, and Norton Canes. Between Brownhills and Norton Canes there is a large tract of common land, which, if planted with trees, would give a certain amount of beauty and mitigate somewhat the bleak and cheerless aspect of this part of the district.

· The natural drainage of the district is into tributaries of the river Tame, with the exception of a small part towards the north, which drains to the river Penk.

The surface geological formation is for the most part, of sandstone and gravel.

The occupation of the inhabitants is chiefly mining.

There are a good many cases of Nystagmus amongst the miners, which seems to have increased to a certain extent during the last five years, probably in great part due to the strain occasioned by demands made on the men during the four years of war.

The area of the district is 6,307 acres. The population, estimated to the middle of the year, is 17,956. The census of 1911 gave a population of 16,856, giving an increase since that time, of 1,100.

# WATER SUPPLY.

This is dealt with in the Sanitary Inspector's Report. The Water from the South Staffordshire Company's mains has little if any plumbo-solvent action. A number of the wells mentioned in his report, and the houses they supply, are all situated at a considerable distance from the Company's mains. Periodically samples are taken from these wells for testing as to their fitness for drinking purposes.

# POLLUTION OF RIVER AND STREAMS.

With the exception of the large unsewered portion of Norton Ward, which, as before stated, drains into tributaries of the River Penk, all other streams and water courses at present contaminated by sewage material, are dealt with in the scheme mentioned under the heading of Drainage and Sewerage.

# DRAINAGE AND SEWERAGE.

The Sewage Farm at Walsall Wood deals with the sewage from Brownhills, Clayhanger, Shire Oak, Walsall Wood, Shelfleld and High Heath, by means of bacterial beds and land filtration. Filter beds which had become clogged up have been emptied, the old media removed, and new filter media is being substituted. The effluents from land and beds are satisfactory.

#### NORTON WARD.

The greater part of Norton Ward is not sewered. It is a district that will develop in the future, and the matter must have the early and careful consideration of the Council.

The sewering of Watling Street East, White Horse Road, and Chapel Street, was completed in 1916. Practically the whole of the properties, with the exception of the County Council Schools, have been connected, and the sewage dealt with by bacterial treatment at the joint works of the Lichfield Rural and Brownhills Urban District Councils.

Plans, specifications and estimates have been prepared for dealing with the drainage of 480 houses at Watling Street West, Wilkin Road, Hednesford Road, part of Coppice Lane, Coppice Road, Pelsall Road, and Clayhanger Road.

# CENTRAL WARD.

Plans have been prepared for dealing with the sewerage of 653 houses at Brownhills and Shire Oak. Here, owing to subsidences caused by mining operations, the re-construction of sewers and the provision of a pumping station, with the necessary Engines and Pumps, with rising main, is necessary to deliver the sewerage on to the sewage farm for treatment, as it cannot now be done by gravitation.

The plans, specifications, and estimates have been deposited with the Ministry of Health, requesting their sanction for authority to obtain a loan for carrying out the work. The Council is anxious that the Ministry of Health will cause a public inquiry to be held as early as possible, so that the work may be commenced without delay, as the carrying out of these schemes is urgent.

# CLOSET ACCOMMODATION.

There are 648 water closets in the district. Of these 139 are hand flush and sixty are waste water. Pail closets number 244. Privies, 2,403.

The number of conversions during the year is—Privies converted into water closets, 12. Pail closets converted into water closets, 6. Since 1914 there is an increase in the number of water closets of 77.

The work of conversion was going on rapidly before the war. This conversion is the only real solution to the present insanitary method of removal of excreta.

There is little excuse for any district, especially an Urban District, to tolerate the continued existence of the old Privy system, and the attendant evils are so numerous and obvious that the conversion of Privies into water closets ought to be one of our first considerations.

# SCAVENGING.

The method of refuse disposal is dealt with in the Sanitary Inspector's Report. I am not satisfied that the removal of refuse is carried out as systematically as it ought to be. The necessity should never arise for a householder to send word that the ashpits and privies require emptying, except on very exceptional occasions.

Personally I have found a considerable number of ashpits overflowing. The Health Visitors also frequently call my attention to this fact.

I would suggest that the Health Committee take the matter up, with a view to preparing a scheme, and instruct the night soil foreman to carry out this scheme. Possibly it may entail the employment of more men and further apparatus.

# SCHOOLS.

The Watling Street Schools, although there is a sewer available for connection, are still served by ordinary privy closets. In addition the cloakroom accommodation is insufficient. The inside walls are dirty and require re-painting. Especially is this the case in the Boys' Department.

The cloakroom accommodation of the Ogley Hay Schools is inadequate, both in the Higher Departments and in the Infant Department.

The Church of England Schools, Walsall Wood, Higher Departments and Infant Department, are served by privy closets. They are close to the main sewer and could easily be connected. Here the cloakroom accommodation is also insufficient.

# MILK SUPPLY.

The milk supply is largely imported from the outlying districts. There are sixteen dairies and cowsheds, this is a decrease of four since my last report. Some of these are structurally bad and will require alteration.

In certain cases milk has been supplied free by the Council to nursing mothers, and also to children artifically fed. Dried milk has also been supplied at a reduced cost and in a few cases, free.

# SLAUGHTER HOUSES.

There is no Public Abattoir in the district; no thorough inspection of meat at the time of slaughter can be carried out until there is. The condition of the Slaughterhouses is commented upon in the Sanitary Inspector's Report.

No action has been taken under the Sale of Food and Drugs Act.

# INFECTIOUS DISEASES.

I had notified to me during the year the following cases of Infectious Diseases:—

23 cases of Scalet Fever

33 ,, ,, Diphtheria

12 ,, ,, Erysipelas

5 .. . Cerebro-Spinal Fever.

19 ., Pneumonia

1 ,, ,, Dysentery

5 ,, ,, Malaria

3 ,, ., Ophthalmia Neonatorum

24 .. " Tuberculosis

1 ,, ,, Encephalitis Lethargica

#### CEREBRO-SPINAL FEVER.

of the five cases notified four died. Two of the cases gave a positive result on lumbar puncture. One of the cases gave a negative result. Pharyrgeal swabs were taken from known contacts in all the cases, with a negative result. One of the cases recovered. One of the cases which gave a positive re-action on examination of the Cerebro-Spinal Fluid, occurred in a house where another child had died from the same disease four years previously. All the known contacts in connection with the affected cases were treated with the portable Steam Atomiser.

# ENCEPHALITIS LETHARGICA.

This case occurred during the month of March. There was no paralysis of the eye muscles or of the muscles of the face. There was the gradual lethargy and the case died about fourteen days from onset.

#### POLIOMYELITIS ACUTA.

There was one case during the month of March. There was extensive paralysis of both legs.

# SCARLET FEVER.

Most of the cases were of a mild type. Disinfection of the rooms, and clothing, etc., was carried out by the Inspector on recovery of the patient. One death occurred from this cause.

# DIPHTHERIA.

There were 33 cases of diphtheria notified. In most of the cases anti-diphtheretic serum was used. There were five deaths from the disease. In many of the contacts the portable Steam Atomiser was used, and it seemed with good result.

Disinfection was carried out by the Inspector on notification by the Medical Practitioner attending the case.

# OPTHALMIA NEONATORUM.

The services of the Health Visitors were utilised in these cases. One of the cases was attended at home, until the child's eyes were clear. The other two cases were sent to Hospital. In one case the eyes were practically well when sent home. In the other the result was not so good; One eye is almost blind, and the other has still a slight opacity of the cornea remaining.

# PULMONARY TUBERCULOSIS.

There were nineteen cases of Pulmonary Tuberculosis reported. All those cases were visited and the conditions the patients were living under enquired into. Most of the cases were already isolated and the infective nature of the disease recognised by the rest of the household. Instructions were given as to the necessary precautions to be adopted for the avoidance of infection of others. Twelve deaths were from this cause. Of the other cases of Tuberculosis notified

- 1 was glandular;
- 2 were Peritoneal;
- 1 Meningeal;
- 1 Hip Joint.

# MALARIA AND DYSENTERY.

The notified cases of Malaria and Dysentery were all contracted abroad, the infected persons in all cases being discharged soldiers.

# PNEUMONIA.

Nineteen cases of Pneumonia were notified. This does not represent, I think, the total number of Pneumonia cases occurring in the district. I will take an early opportunity of reminding some of the medical practitioners that pneumonia is a notifiable disease.

# MEASLES.

There were twenty-five cases of measles notified. The disease is no longer notifiable.

Full advantage is taken by the Medical Practitioners of the Bacteriological Facilities offered by the County. These examinations are made at Birmingham University.

There is no Fever Hospital and isolation has to be carried on at home. Home circumstances occasionally make this rather difficult. The little portable steam sprayer purchased by the Council, has proved itself useful, not only in the homes, but also in the schools, and in my opinion, with advantage.

The Medical Practitioners are supplied with anti-diphtheretic toxin free. Practically all the cases receive an injection.

Periodic reports are received from School Teachers as to the prevalence of infectious diseases in the School, both notifiable and not notifiable.

The scheme for dealing with Tuberculosis is under the direction of the County. All the medical practitioners, to the best of my knowledge, are careful to notify all cases coming under their care and are ready to submit doubtful cases to the Tuberculosis Officer for confirmation of diagnosis.

#### VENEREAL DISEASE.

This scheme is also under the direction of the County. The Clinics are within ready access of the district. There has certainly been quite an appreciable increase in the number of persons affected with this disease. Most of them were ready to avail themselves of the treatment given at the clinics.

# MATERNITY AND CHILD WELFARE.

There are two Health Visitors working in the district, the one taking Walsall Wood and Shelfield, the other Brownhills and Norton Canes.

Unfortunately, Miss Bown had to give up work on account of illness during the latter part of the year. For this period Brownhills and Norton Canes have been without a Health Visitor.

A temporary appointment will be made shortly until Miss Bown is fit to commence duty again. The following is a resumé of her report to me:—

265 Births have been notified. 263 of these were alive. 2 were prematurely born. There were 8 still-born babies.

I have made 28 visits to expectant mothers, 210 first visits to children, and 1,659 re-visits. Two cases of Opthalmia Neonatorum were notified—one at Shelfield, the other at Norton. I carried out treatment in the Shelfield case for several days, but as the case was a bad one and required constant attention, it was a dmitted to the Workhouse Infirmary.

The Medical Officer of Health came for me one Sunday afternoon to take charge of the second case. On Monday I had it removed to the Dudley Guest Hospital.

Lectures and demonstrations have been given to the mothers an older school-girls.

I have had considerable trouble with verminous cases.

The Glaxo sold by me at the Council House has been taken advantage of by the mothers, and has been much appreciated by them. Owing to illness I have now cancelled the order and mothers are feeling the loss.

I made 600 house to house inspections in Norton Canes, Heath Hayes, and Clayhanger during October. Certainly in this part of the district Housing Conditions are not by any means good.

Miss Hamilton, the Health Visitor for Shelfield and Walsall Wood has, during the part of the year she has been at work, made 60 visits to expectant mothers, 42 re-visits, 178 first visits to children, and 1,285 re-visits. Her report is as follows:—

Babies are, as a rule, well cared for, and are for the most part breast-fed.

I have had a good deal of trouble with cases of Scabies. In certain of the cases mothers have not persistently continued the treatment and have left off before cure was complete.

I assisted in the inspection of Houses during October. In my part of the district especially in Shelfield, there is a large proportion of the houses overcrowded, and there are a good many insanitary conditions.

Privies are badly constructed, many allowing the contents to ooze to the exterior. They are certainly not emptied often enough. Many of the houses are damp and dirty and give little encouragement to the tenants to try and keep them clean.

# INFECTIOUS DISEASES HOSPITAL.

There is no Hospital for Infectious Diseases, with the exception of the Smallpox Hospital.

I have tried, on several occasions, to get some of the neighbouring Authorities to combine for this purpose, and I am at present in communication with the Medical Officer of Health of an adjoining district.

# SMALLPOX HOSPITAL.

This Hospital is not yet in a fit state to receive patients, should a case of smallpox arise in the district, the treatment and nursing of the case could be carried out only with great difficulty.

# BYELAWS AND ADOPTION ACT.

The old Bye-Laws were revised in accordance with the Model Bye-Laws of the Local Government Board some five years ago. Certain sections of these revised bye-laws were approved by the Local Government Board, but on the outbreak of war the matter was left in abeyance. Now it will have to be taken up again the other sections sanctioned by the Ministry of Health, and the, bye-laws put into force in the district as soon as possible. Certain clauses comprised in parts 2, 3 and 4 of the Public Health Amendment Act, 1907, have been adopted by the Council.

# BACTERIOLOGICAL WORK.

Thirty-one swabs were taking during the year from throats of suspected Diptheria cases—2 of these were positive, 22 were negative, 7 taken from contacts were negative. Sputum from 18 persons was sent for examination—4 sputums gave a positive result; 14 were negative.

Lumbar Puncture was done in three of the cases of reported Cerebro Spinal Fever—2 gave a positive result; the other negative. Swabs taken from the Noso Pharynx of all known contacts were negative.

# DEATH RATE.

The number of deaths during the year was 235. Of these, 121 were males; 114 females.

The death rate is 13.8 per thousand, and the death rate for England and Wales for the year gives exactly the same figures.

The following is a statement of the causes of death:-

	М.	$\mathbf{F}.$	Total.
Scarlet Fever		1	 1
Whooping Cough	1	4	 5
Diptheria	5		 5
Influenza	15	7	 22
Pulmonary Tuberculosis	6	6	 12
Tuberculosis Meningitis	2	1	 3
Other Tuberculosis diseases	1	_	 1
Cancer, malignant diseases	6	11	 17
Rheumatic Fever	2	1	 3
Meningitis	2	2	 4
Organic Heart Disease	11	7	 18
Bronchitis	16	10	 26
Pneumonia (all forms)	6	13	 19
Other Respiratory Diseases	1	0	 1
Diarrhœa (under 2 years).	2	3	 5
Appendicitis and Typhlitis	1	0	 1
Nephritis & Brights Disease	3	1	 4
Congenital Debility	6	12	 18
Violence (apart from			
Suicides)	3		 3
Suicide	2		 2
Other Defined Diseases	30	34	 64
Causes ill-defined or			
Unknown		1	 1
Cerebro-Spinal Fever	1	$^2$	 3
Polionyelitis		1	 1
	121	114	 235

Influenza, which was prevalent during the first quarter of the year, accounted for 22 deaths. Respiratory diseases caused 46 deaths.

# BIRTHS.

There were 453 births registered during the year. The Birth Rate is 24 per thousand. This is the lowest birth-rate that I can find recorded for the district. That of England and Wales is 18.5.

# INFANTILE MORTALITY.

The number of deaths under one year was 28. This gives a death rate per thousand births of 61.8. It is very much lower than the two previous years—

1918 being 124 per thousand. 1917 , 106 , ,

The rate for England and Wales was 89.

Congenital Debility and Marasmus was responsible for 18 deaths. The following is a list of the causes of death:—

Congenital Debility,	&c.	 18
Influenza		 2
Broncho Pneumonia		 2
Whooping Cough		 1
Convulsions		 1
Epidemic Diarrhoea		4

# HOUSING.

The number of houses in the district is 3,440. With few exceptions, the houses are occupied by the working classes and by those who minister to their needs.

New houses erected during the year number, two. The estimated population is 17,956, this gives an average of 5.2 persons to each house. As more than half of the houses contain two bedrooms the average is larger than it ought to be.

One hundred and twenty-eight of the houses were occupied by two or more families, the total number of occupants being 1,015, an average of 7.9 to each house.

It is rather difficult at present to give an opinion as to the changes that may take place in the future in population. Norton Canes portion of the district will develop considerably in my opinion. Shelfield will have opportunity to develop owing chiefly to its close proximity to the town of Walsall.

The central part of the district will, I consider, remain very much as it is at present.

The estimated shortage of houses for present needs is 250 houses. These 250 houses will do away with overcrowding and would allow certain properties to be closed for repairs. It is taken for granted that each house would have three bedrooms. If, in addition to present needs, an estimation has to be made for increasing population, the required number would be at least 350.

Little could be done during the year to remedy the over crowding, as the overcrowding was entirely due to the shortage of houses. The general standard of housing would be fair, if repairs could be carried out promptly, but, although landlords are eager in many cases to get repairs done and to remedy existing insanitary conditions, the difficulty was and is still to get workmen to carry out the work. In this district the shortage of workmen in this particular branch of work is as serious as the shortage of houses

The general character of the defects found to exist in unfit houses is found in the Sanitary Inspector's Report.

Two defects which particularly force themselves on the attention of any one engaged in medical or nursing duties are the large number of bedroom windows that do not open, in some cases the fault of the tenants, in many cases owing to want of repair; and the miniature firegrates that refuse to give out any warmth. These two defects frequently combine to make the treatment and nursing in acute illness an arduous and discouraging task.

Particulars with regard to complaints made and actions taken under the various Acts are given in the Sanitary Inspector's Report.

The staff engaged in the housing work consists of—the Sanitary Inspector. During the survey of housing conditions, which was completed in October, he was assisted by the two health visitors and two others. This survey of houses ought to continue, and, in my opinion, in a district as large as ours, full time work could be found for another official who would make this work the principal duty and at other times assist the Sanitary Inspector.

Local authorities must realise that good housing conditions are a fundamental necessity for the welfare of the people. Neither healthy bodies nor healthy minds can flourish in an atmosphere of dirt and ugliness. Certainly for the present, Local Authorities must content themselves to strive after a standard of general fitness of housing conditions, but with the intention that this standard realised, their ideals should be ultimately a standard of amenity throughout the district.

In summary the important matters that require to be taken up and pushed forward as quickly as possible are:—

- I. The conversion of privies to water closets wherever this is possible.
- II. The systematic removal of refuse material.
- III. The completion of the revision of the Bye-Laws.
- IV. Appointment of an official to assist in the systematic inspection of housing conditions.
  - V. The carrying out of the work necessary to get the Smallpox Hospital into a condition to receive cases. should the occasion arise and the provision of an Hospital for Infectious cases other than smallpox, jointly with another district if possible.

In conclusion, I wish to thank the members of the Council for the interest they have taken in matters which I have brought forward, and my fellow-officials for the help and assistance they have given during the year.

I remain, Gentlemen,
Your obedient servant,
R. G. BRADFORD.

# TO THE CHAIRMAN AND MEMBERS OF THE BROWNHILLS URBAN DISTRICT COUNCIL.

# GENTLEMEN,

The Brownhills Urban District comprises an area of 6.307 acres, or nearly 10 square miles. The number of houses and population (estimated) is as follows:—

			No. o	of House	es.	Popul'n.
Central	Ward		 	879		4,588
Norton	Canes	Ward	 	1,086		5668
Walsall	Wood	Ward	 	1,475		7,700

Total number of houses, 3,440. Total estimated population, 17,956 or 1,795.6 persons per square mile.

# WATER SUPPLY.

The water supply generally 's provided by the South Staffs. Water Works Company, and is a constant supply of good quality.

There are still a number of wells existing in your area as follows:—

		No.	of Well	ls. H	'ses. Sup	O
Central Ward		 	12		40	
Walsall Wood		 	19		37	
Norton Canes		 	31		64	
	0.0	 -	** ** **			

Total Wells 62. Houses Supplied 141.

Samples of water will be taken in due course from the whole of the above-mentioned wells and submitted to the County Analyst for examination and testing as to quality and fitness for drinking purposes.

# NUISANCES.

The following is a tabulated statement of nuisances discovered and dealt with under the Public Health Act, 1875, Housing, Town Planning, Etc. Act, 1909, and the Council's Bye-Laws:—

Structural Defects	 	22	
Defective and Inefficient Drains		26	
Defective Water Closets	 	27	
" Privies and Ashpits	 	39	,
" Spouting	 	10	
Other Nuisances	 	2	

Notices describing the Sanitary Defects discovered, with a specification of the work required to remedy these, were issued All the notices have been complied with. In this connection 87 statutory and 19 formal notices were sent, and about 360 visits made.

# POLLUTION OF RIVERS AND STREAMS.

No proper sewage disposal system has yet been adopted in the village of Norton Canes, continual subsidences which are taking place in this area through coal mining operations put great difficulties in the way.

The drainage from properties situated in this area discharges into ditches and small brooks, a portion of which has its outfall into the brook known as Washbrook, a tributary of the River Penk.

# FOOD SUPPLY.

Forty-two and a-half lbs. bacon, 1 Box herrings, 30 lbs. cheese, and 72 rabbits were examined and found to be unfit for human consumption. This unwholesome food was voluntarily surrendered and destroyed.

# SLAUGHTERHOUSES AND BAKEHOUSES.

Number of Slaughterhouses in district, 12. Number of Bakehouses, 11. These are in a good condition and have been periodically visited and found generally to be well conducted.

#### HOUSE REFUSE AND NIGHT SOIL REMOVAL.

Number	of	Houses in Dist	rict	 	3,440
,,	,,	Water Closets		 	628
• • • • • • • • • • • • • • • • • • • •	,,	Pail Closets		 	244
,,	,,	Privy Middens		 	2,403

The condition of the Water Closets is fairly good generally.

The state and condition of the Privy Middens fair, with the exception of those connected with the larger portion of the older class houses. Improvement can only be made in these by reconstruction or conversion (where circumstances are favourable) into water closets.

During the year 12 privies and 6 pail closets have been converted into Water Closets.

The District Council is responsible for the removal of night soil, and the work is carried out by the Council's own staff under the supervision of a foreman.

The method adopted for removal is by means of open carts. Where it is possible the carts are drawn close up to the ashpits and loaded, otherwise the ashes and excreta is wheeled in barrows and tipped on to the roadway, mixed together, and then filled into

the cart and taken to the Tip, after which the portion of roadway used for this purpose is swept and cleansed and disinfectant powder, scattered over the surface. This work is still being carried out in the daytime.

# INFECTIOUS DISEASES.

38 Rooms and 44 lots of Bedding and articles, disinfected after infectious Disease.

#### HOUSING.

${\bf Number}$	of House	s in the District		3,440
,,	,,	with 1 Bedroom		95
,,	,,	with 2 Bedrooms		1,862,
,,	,,	with 3 Bedrooms		1,483
,,	,,	with Baths		92
Number	of New H	louses erected during	year	2

In connection with the recent Housing (Survey of District), 3,388 houses were visited, out of this number 128 of the houses were occupied by two or more families.

# ACTION TAKEN UNDER SEC. 17 OF HOUSING ACT.

Number	of	Dwelling	Houses	inspected	 35
Number	of	Dwelling	Houses	found defective	 35

Notices were served upon the owners of the defective houses to remedy defects. 20 of the notices have been complied with. Arrangements are being made by the owners to carry out the repairs necessary in order to comply with the remaining 15.

No action has been taken under Section 28 of the Housing Act.

# DIFFICULTIES IN ADMINISTRATION.

In my opinion the primary cause of difficulty in administration with respect to improvement of defective houses generally, is due to the great shortage of houses. No doubt there is a number of small property-owners who are taking advantage of this fact, and are not carrying out even the most reasonable and necessary repairs required to improve their properties.

Then the question of means, in order to carry out improvements and repairs, comes well to the fore in connection with a large number of small property-owners, when you consider the very high prices of labour and materials. As an instance, the owner of a small cottage rented at 4s. per week, had to renew a small boiler and firebar in the scullery of this cottage. The cost of this small item was 25s., or more than what six weeks rent amounted to. This also shows the need for an adjustment of the present Rent Act in order that property owners can be reasonably and fairly compensated in respect to cost of repairs and improvements carried out.

Then again there is a difficulty owing to shortage of skilled labour, and materials. It was stated in the Press recently that 320,000 bricklayers, besides other tradesmen, were still required, in order to cope with the proposed Housing Schemes.

#### SUGGESTED REMEDIES.

- (a) The erection of new houses as quickly as available labour and materials will allow;
- (b) Adjustment of the present Rents Act to allow owners to increase rents to a fair and reasonable basis consistent with the increased cost of repairing and improving their properties.

In cases where owners of houses are stubborn in carrying out works necessary in order to remedy defects, then the Council undertake and carry out the work required, and proceed to recover the costs from the owner thereof in a manner provided for on the Housing and Town Planning, etc., Act.

No closing orders were issued during the year.

Repairs and improvements are required in connection with a considerable number of the houses in the area, largely owing to the enforced neglect during the past five years.

The defects to these houses include Defective Roofs, Spouting, Plaster, Grates, Doors and Windows, Privies, Ashpits, Damp Walls, etc.

It is hoped that circumstances will as soon as ever possible, become more favourable, thereby allowing these defective houses to be put in order as speedily as possible.

I Remain, Gentlemen,
Your Obedient Servant,
DAVID A. BRADBURY

